

U.S. Department of Justice  
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF <b>Troy Moore, Sr.</b>	COURT CASE NUMBER <b>14-3873</b>
DEFENDANT <b>S. Walton, Corrections Officer</b>	TYPE OF PROCESS <b>LAWSUIT</b>

**SERVE** → **NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN**  
**8301 State Road-- Philadelphia, Pa 19136 Correctional Industrial Center**

**AT** **8301 State Road --- Philadelphia, Pa 19136**

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:


<input type="checkbox"/> Troy Moore SCI-Forest P.O. Box 945 Marienville, Pa 16239	Number of process to be served with this Form - 285 <b>1</b>
	Number of parties to be served in this case <b>1</b>
	Check for service on U.S.A. <b>xxx</b>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):  
Fold

It is imperative that you serve Judge Robreno and plaintiff a copy of process receipt in a timely manner. It has been 8 months since defendant Walton has not been served as required. Plaintiff aunt will be calling your office to ascertain information about serving defendant Walton..

Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER <b>n/a</b>	DATE <b>9-16-16</b>
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <b>1</b>	District of Origin <b>66</b> No.	District to Serve <b>66</b> No.	Signature of Authorized USMS Deputy or Clerk 	Date <b>10/6/16</b>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service Time am pm
	Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

① City will not Accept - Duplicate Records need more info re Just caption the City as Defendant. B. DeRosa 10-18-16